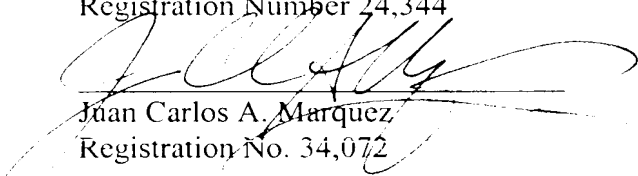


- IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

- ☐ Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- ☒ A check in the amount of **\$465.00** to cover the three-month extension fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees associated with this communication, including patent application filing fees and processing fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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August 26, 2003